

# **DRUG COURT SELF-ASSESSMENT**<sup>©</sup>

Utilizing the Key Components  
as a Standard

Developed by:  
Judge William G. Meyer  
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# **INTRODUCTION TO THE DRUG COURT SELF-ASSESSMENT**

The drug court self-assessment is not a test. It will not be graded. Your assessment will not be compared against others to determine which court is “better.” As noted in the publication Defining Drug Court: The Key Components, not every jurisdiction will have components that are perfect “tens.” The Key Components are designed to be inspirational, defining the very best practices, designs, and operations of drug courts. Thus, the results of your self-assessment should not be viewed as a failure where you don’t meet the benchmark, rather it should be viewed as an opportunity from which you can improve, given adequate resources and considering the political realities in your jurisdiction.

If you don’t know the answer to a statement and, therefore, cannot rate it, you must rate yourself a “one.” Obviously, this will motivate you to find out the answer. Be candid in your responses.

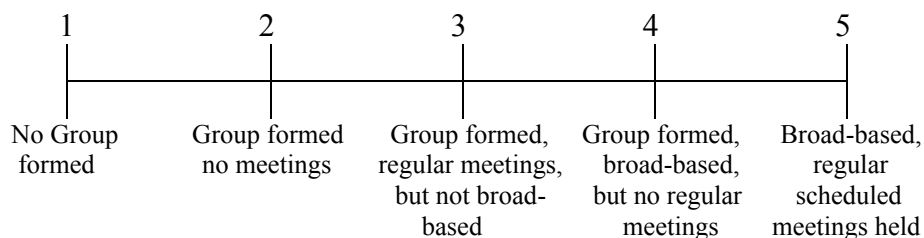
The drug court self-assessment was designed as a tool of assistance, not a scale of adequacy. The self-assessment is intended to inform practitioners of the areas upon which they can focus to improve their program. Please use the assessment as designed.

WILLIAM G. MEYER  
District Court Judge

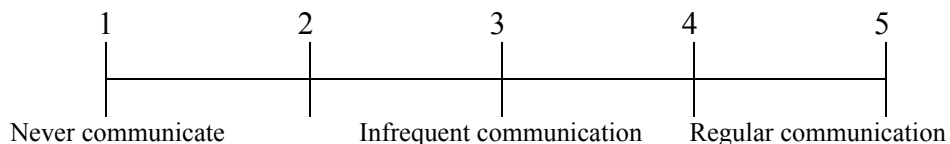
# KEY COMPONENT #1

## Drug courts integrate alcohol and other drug treatment service with justice system case processing

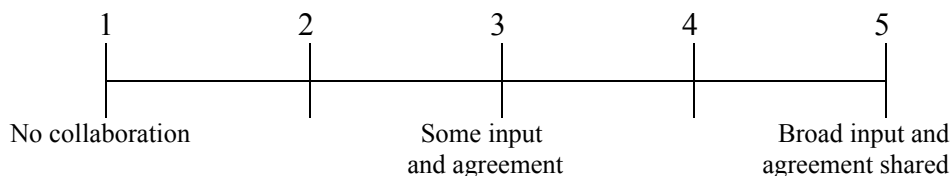
- A. Initial and ongoing planning is carried out by a broad-based group that meets regularly.



- B. Court and treatment providers maintain ongoing communication about general problems that arise.



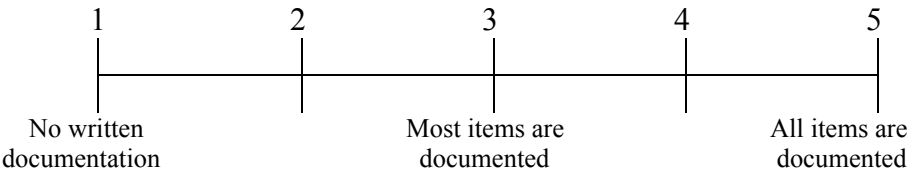
- C. The drug court's mission goals, eligibility criteria, operating procedures, and performance measures are collaboratively developed and defined.



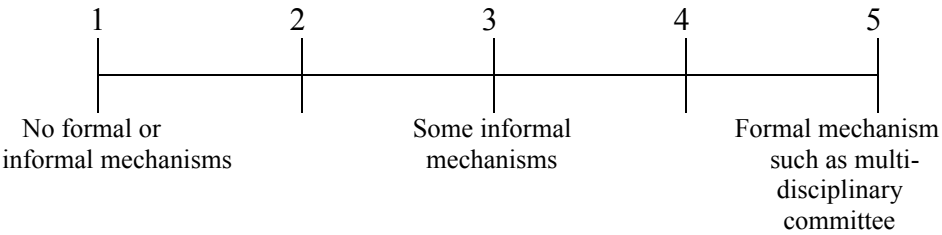
# KEY COMPONENT #1

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D. Documents exist that detail drug court’s mission, goals, eligibility criteria, operating procedures, and performance measures.



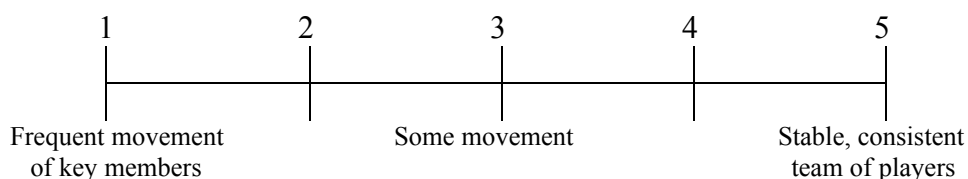
E. Mechanisms exist for shared decision-making and conflict resolution among drug court team members.



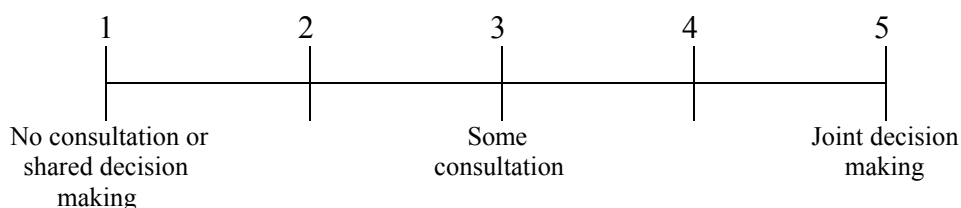
## KEY COMPONENT #2

Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights

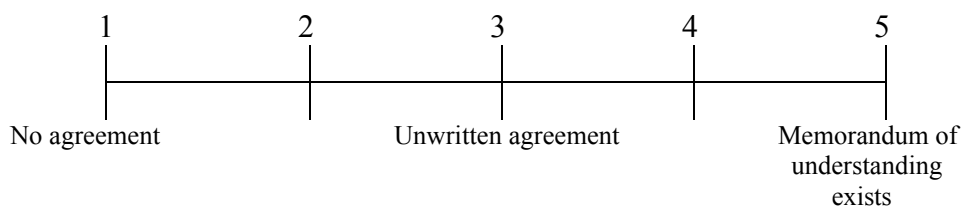
- A. Prosecutors, defense counsel, and judge are assigned to drug court for sufficient time to insure team-building, stability, and consistency.



- B. Prosecutors and defense counsel participate in program design, eligibility criteria, and case processing policies and procedures.



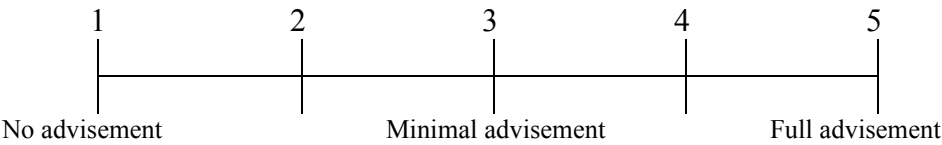
- C. Prosecutors and defense counsel have a memorandum of understanding regarding defendants' admissions of AOD use during court reviews.



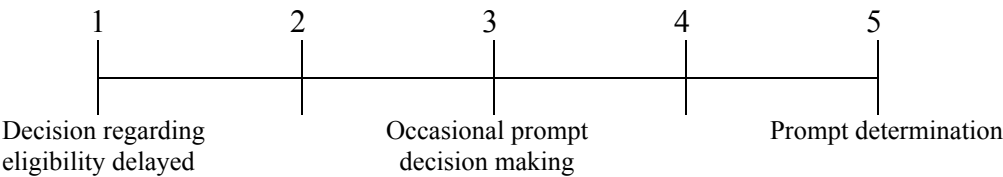
# KEY COMPONENT #2

## Continued

- D. Defense counsel explains to defendant the drug court concept and procedures and advises client of alternative courses of action, including treatment and benefits of sobriety.



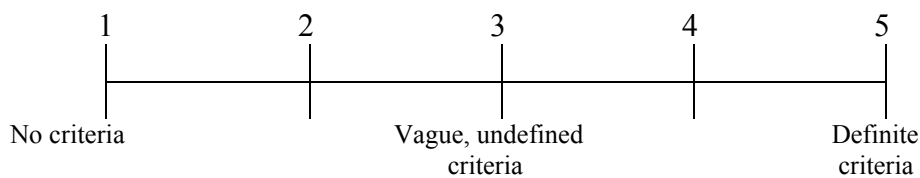
- E. Prosecuting attorney promptly determines eligibility and participates in a coordinated strategy for responding to AOD use.



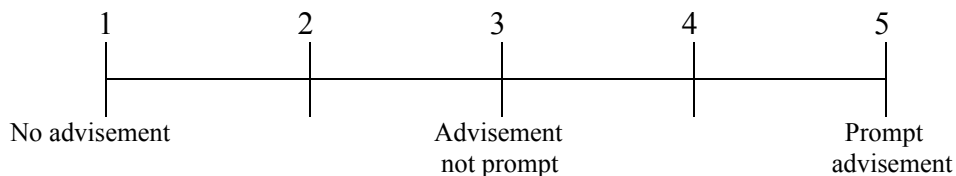
## KEY COMPONENT #3

### Eligible participants are identified early and promptly placed in the drug court program

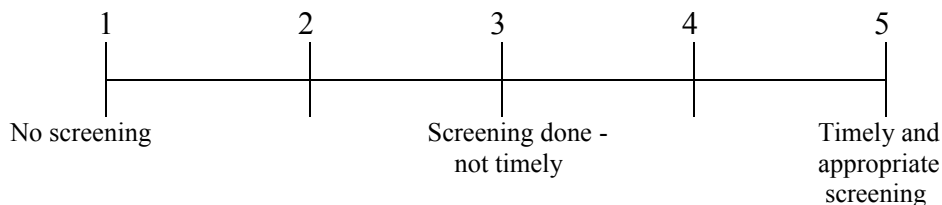
- A. Eligibility screening is based upon written criteria and criminal justice personnel screen cases for referral.



- B. Eligible participants are promptly advised about program requirements and merits of participating.



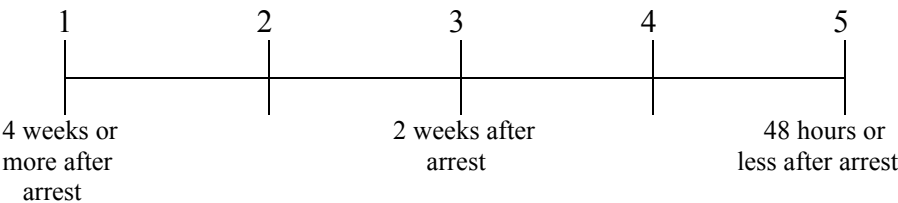
- C. Trained professionals screen eligible drug court individuals for AOD problems and treatment suitability.



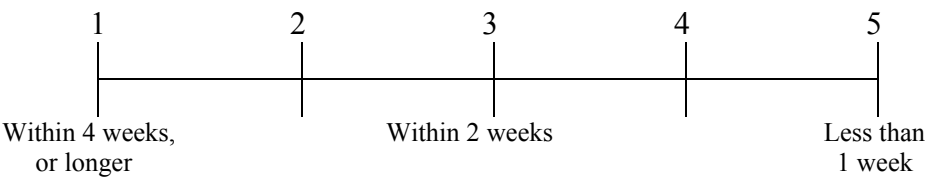
# KEY COMPONENT #3

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- D. Initial appearance before drug court judge occurs immediately after arrest or apprehension.



- E. The court requires that eligible participants enroll in AOD services immediately.

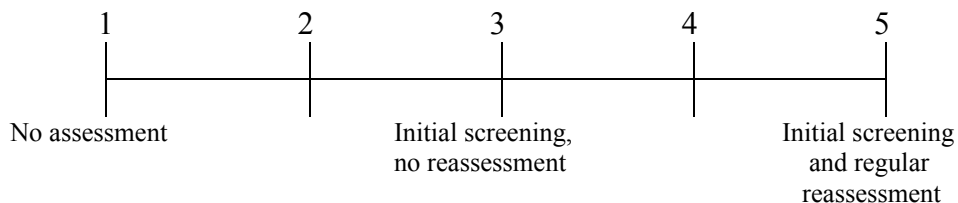




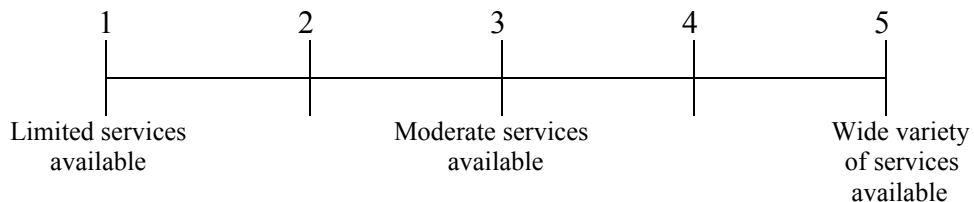
## KEY COMPONENT #4

Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitative services

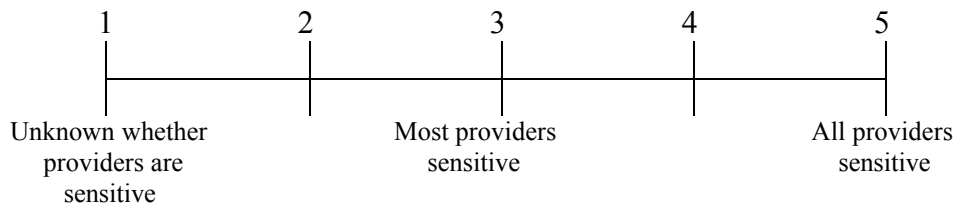
- A. Individuals are initially screened and periodically assessed to insure proper offender/treatment matching.



- B. Treatment services are comprehensive, including detox, education, outpatient, intensive outpatient, inpatient, therapeutic communities, etc.



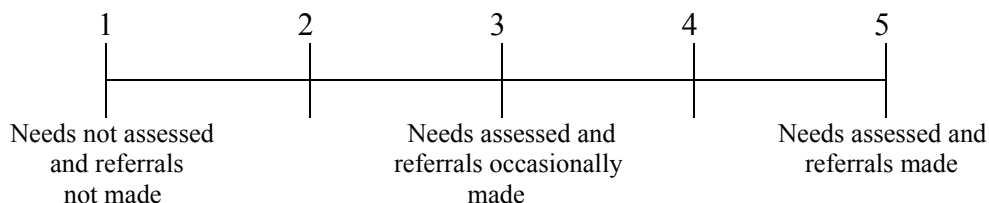
- C. Treatment designs and delivery systems are sensitive and relevant to issues of race, culture, religion, gender, age, ethnicity, and sexual orientation.



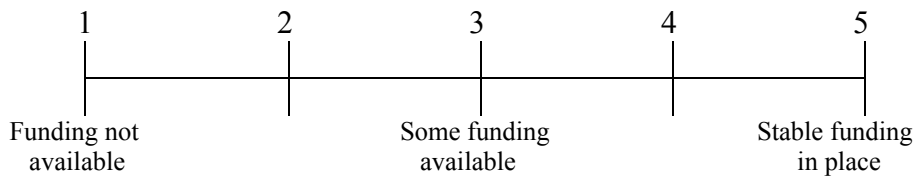
# KEY COMPONENT #4

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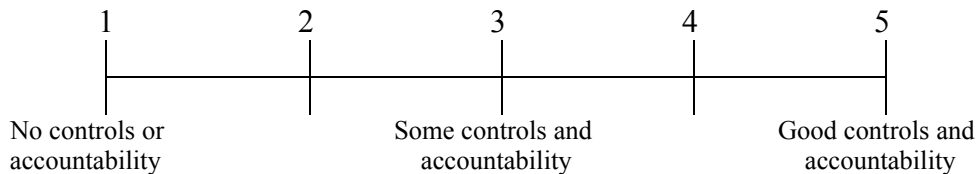
- D. Referral to auxiliary services (i.e., housing, vocational and educational training, social services, job placement, etc.), and special services (i.e., mental health, prenatal care, etc.), are available.



- E. Funding for treatment is adequate, stable, and dedicated to drug court.



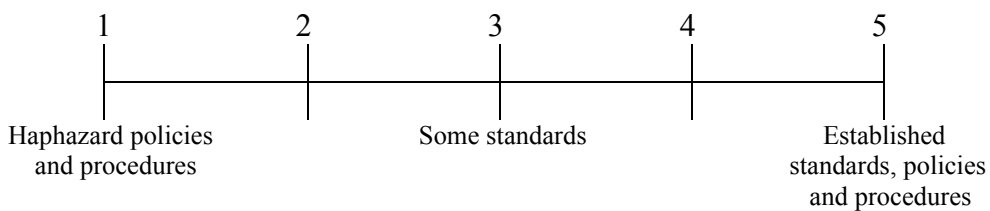
- F. Treatment services have quality controls and are accountable.



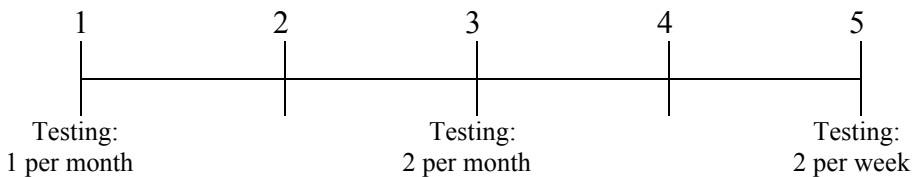
## KEY COMPONENT #5

Abstinence is monitored by frequent alcohol  
and other drug testing

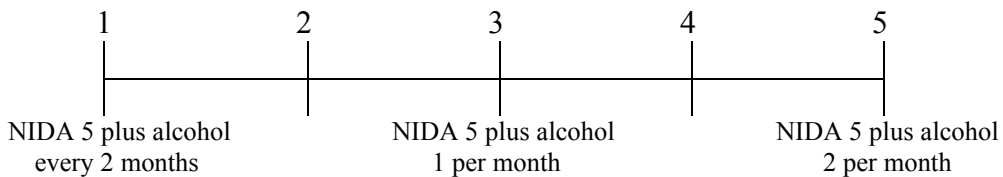
- A. AOD testing policies and procedures are based on established guidelines, such as APPA.



- B. Random testing of not less than two per week initially, decreasing with abstinence.



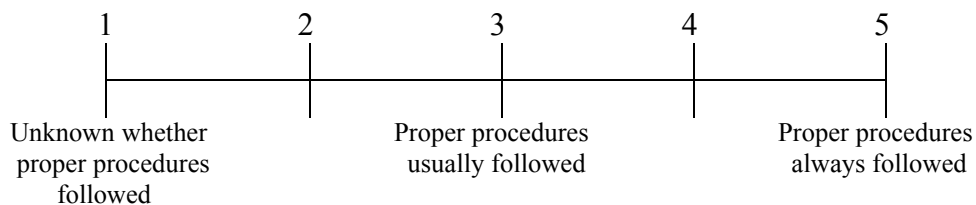
- C. Scope of testing is sufficiently broad to detect drugs of abuse, including alcohol.



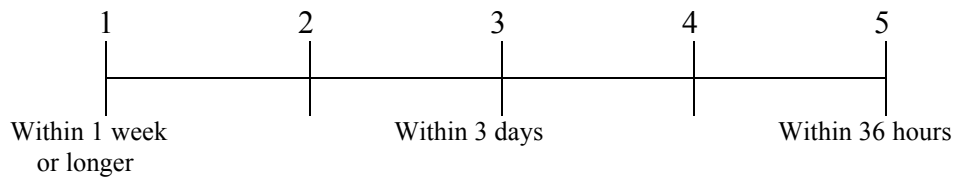
## KEY COMPONENT #5

### Continued

- D. Recognized standard collection and testing procedures are followed to insure high reliability of results.



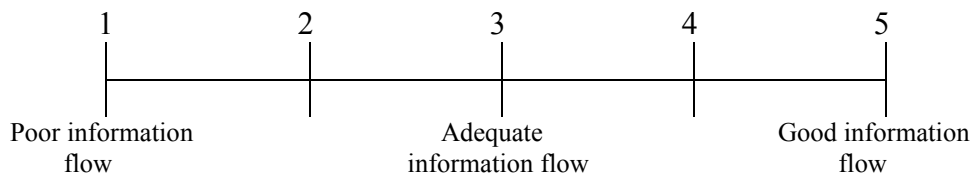
- E. Court is immediately notified when participant fails tests, gives adulterated sample, or doesn't test.



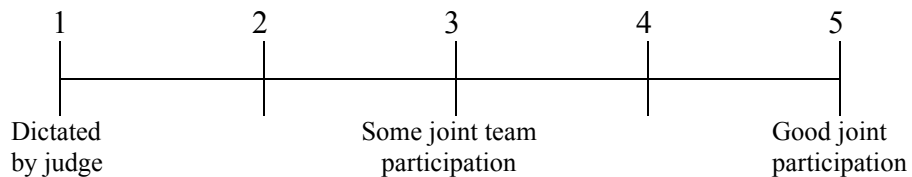
## KEY COMPONENT #6

### A coordinated strategy governs drug court responses to participants' compliance

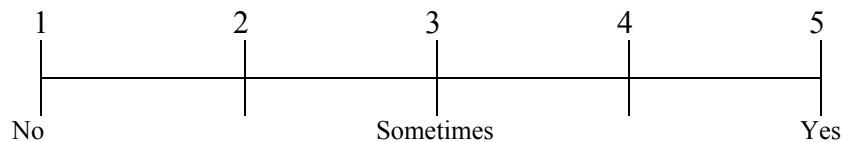
- A. The drug court team maintains frequent, regular communication to provide timely reporting of progress and non-compliance enabling the court to respond immediately.



- B. Sanctions are developed jointly and are imposed after consultation with team members.



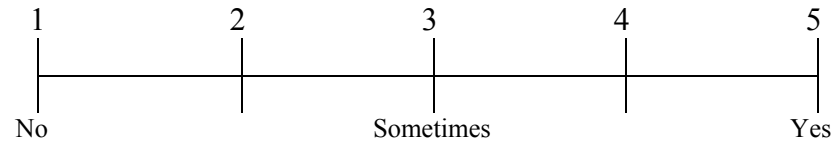
- C. Imposed sanctions are graduated and commensurate with infraction.



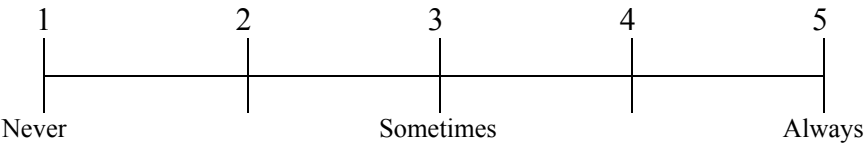
# KEY COMPONENT #6

## Continued

D. Compliance with program requirements is rewarded.



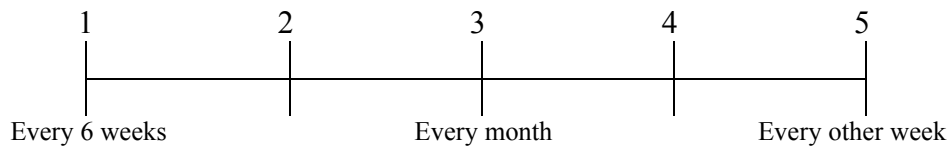
E. Consequences for program compliance/non-compliance are clearly explained to participant before enrollment so participant has clear expectations.



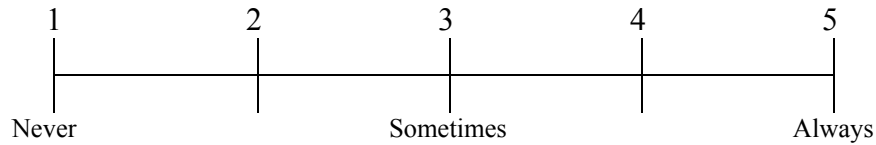
## KEY COMPONENT #7

Ongoing judicial interaction with each drug court participant is essential

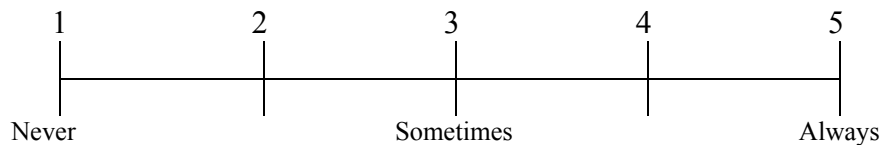
- A. Regular status conferences are used to monitor participant performance.



- B. Interval between status conferences is varied according to treatment protocols and participant progress.



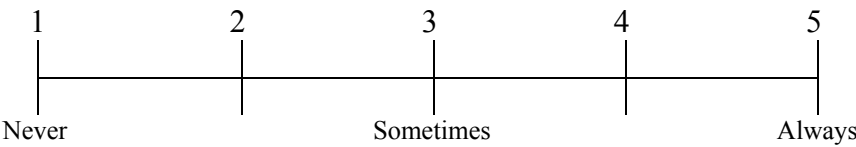
- C. Court-participant interaction demonstrates to participant observers the benefits of program compliance and consequences for non-compliance.



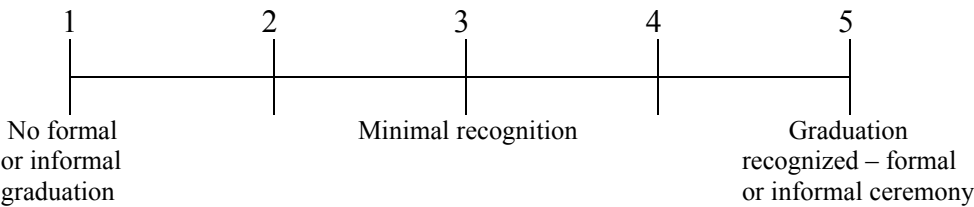
# KEY COMPONENT #7

## Continued

- D. The court applies appropriate sanctions and incentives to match participant treatment progress.



- E. Program graduation is recognized as a significant achievement.

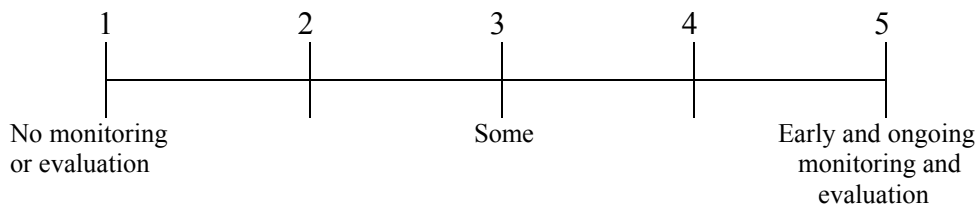




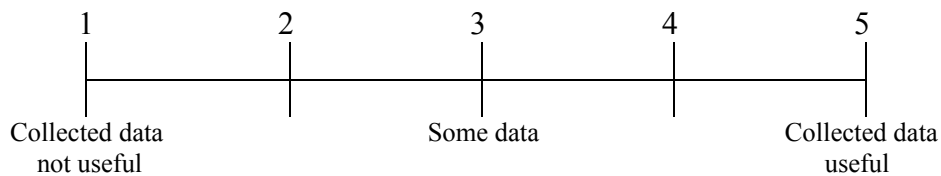
## KEY COMPONENT #8

Monitoring and evaluation measure the achievement of program goals and gauge effectiveness

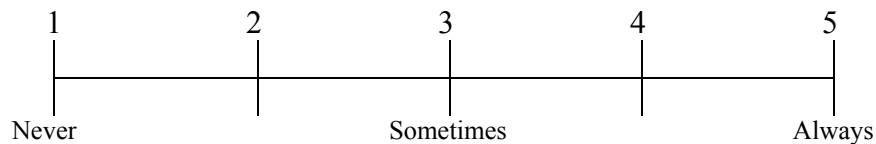
- A. Monitoring and evaluation processes began at planning stage and are ongoing.



- B. Monitoring and management data is assembled in a useful format for regular review by program leaders, managers, and evaluators.



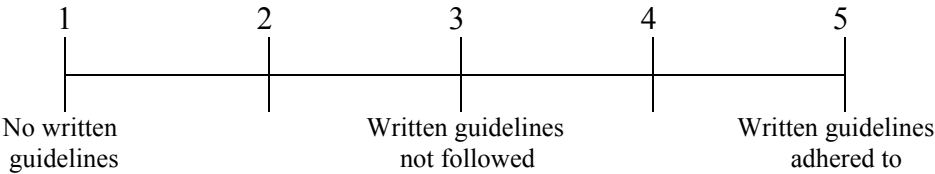
- C. Program managers and leaders periodically review monitoring and management data to analyze program effectiveness, modify operations, and refine goals.



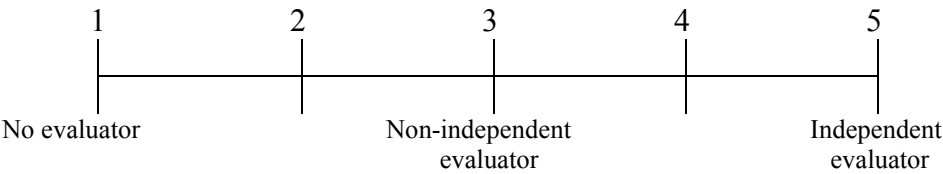
# KEY COMPONENT #8

## Continued

- D. Written guidelines exist and are followed to protect confidentiality and unauthorized disclosure of personal information.



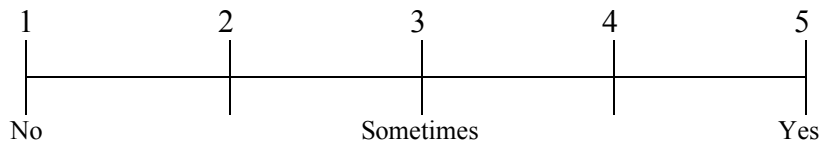
- E. A non-independent evaluator or independent evaluator has been selected and an evaluation is in progress.



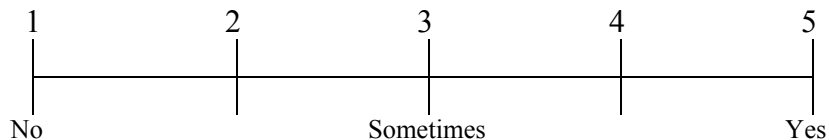
## KEY COMPONENT #9

Continued interdisciplinary education  
promotes effective drug court planning,  
implementation, and operations

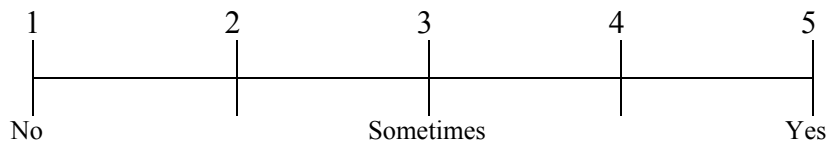
- A. Key personnel have participated in training on the written operating procedures of the drug court.



- B. Multi-disciplinary training is routine for new personnel and ongoing.



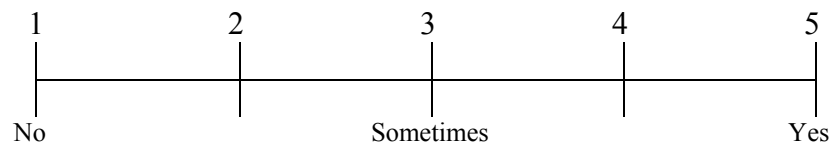
- C. The judge, public defender, prosecutor, probation, and assigned law enforcement staff have undergone training in addiction and substance abuse treatment.



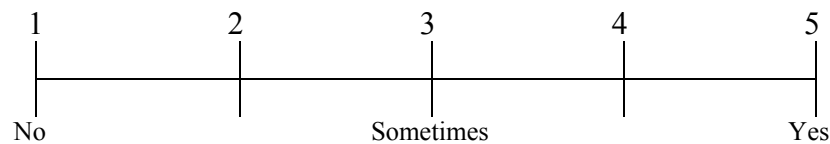
# KEY COMPONENT #9

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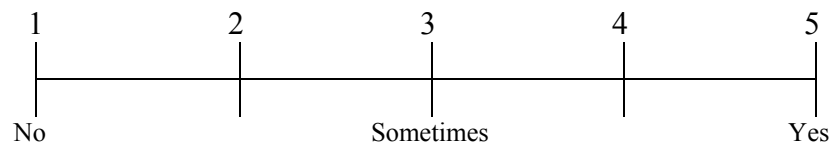
D. Team-building is part of the regular training process.



E. All personnel, including the Drug Court Coordinating Committee, have undergone training on diversity.



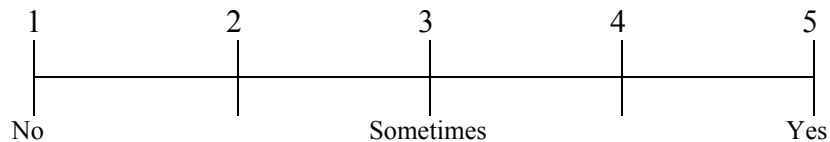
F. The drug court has an educational curriculum that is updated to provide for advances and needs.



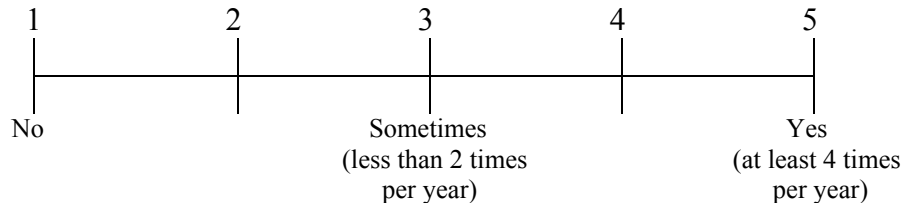
## KEY COMPONENT #10

Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court effectiveness

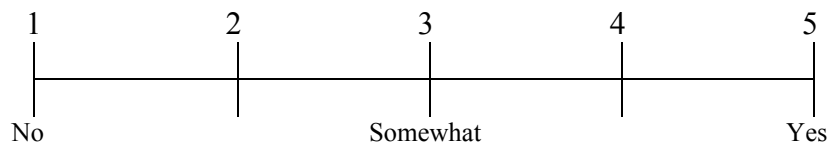
- A. The drug court has appropriate linkages with the law enforcement community to provide support for and monitoring of participants.



- B. Representatives from the court, community, treatment, health, and criminal justice agencies meet regularly to provide direction to the drug court program.



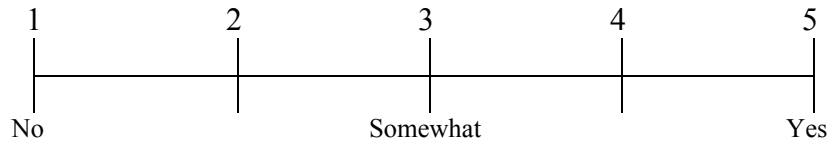
- C. The drug court has a professional staff that reflects the diversity of the population served.



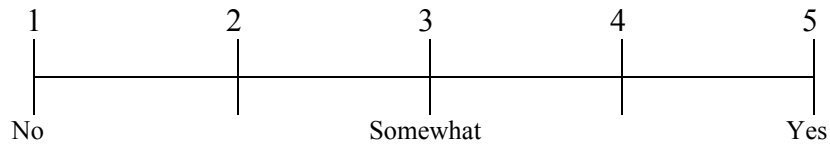
## KEY COMPONENT #10

### Continued

- D. The drug court has a press briefing book and provides opportunities for community involvement through forums and informational meetings.



- E. Participation of public and private agencies and community organizations is formalized through a steering committee.



# Drug Court Self-Assessment

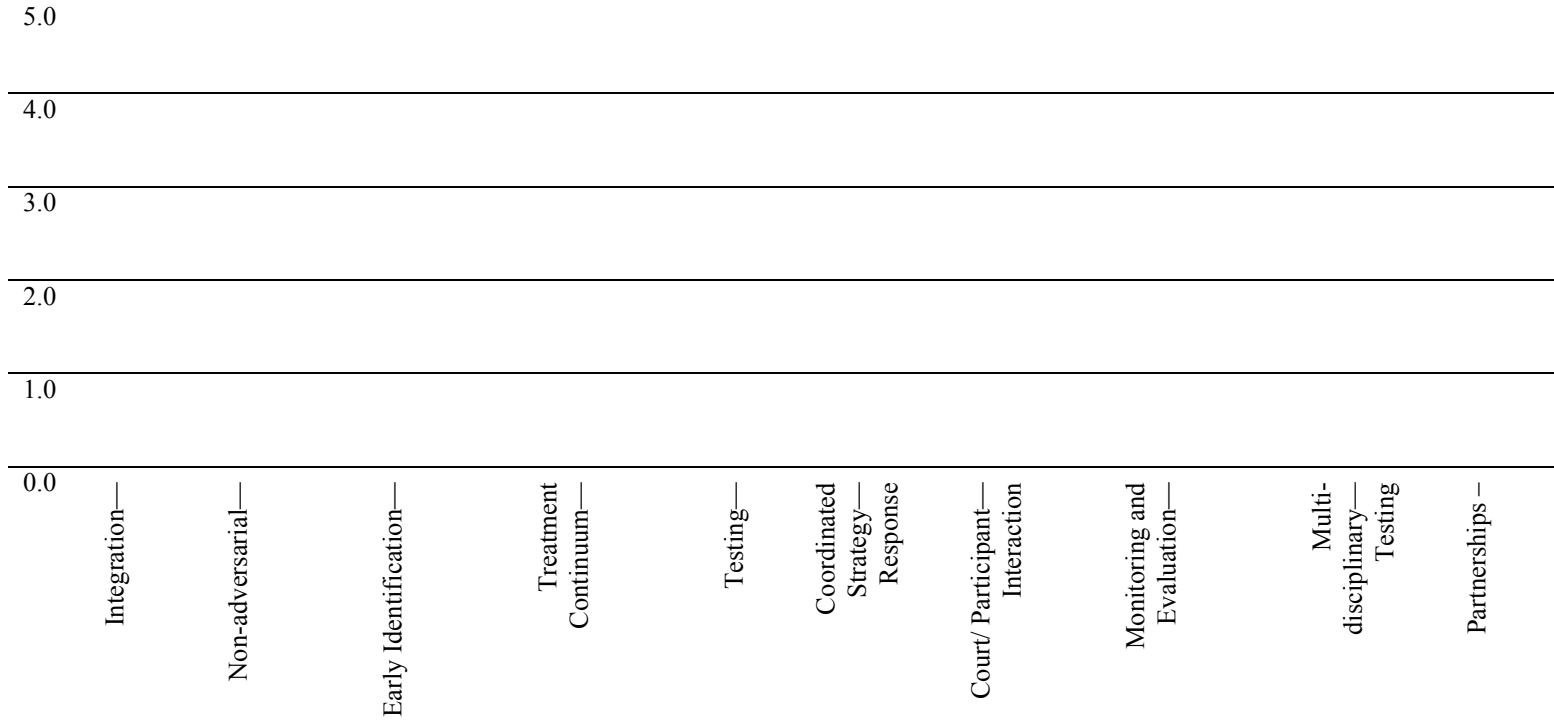
## Jurisdiction Name \_\_\_\_\_

Record the score for each question in the appropriate space below

1. Integration	2. Non-adversarial	3. Early Identification	4. Treatment Continuum	5. Testing
A.	A.	A.	A.	A.
B.	B.	B.	B.	B.
C.	C.	C.	C.	C.
D.	D.	D.	D.	D.
E.	E.	E.	E.	E.
			F.	
Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 30 possible; divide total by 6:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)
6. Coordinated Strategy Response	7. Court/Participant Interaction	8. Monitoring and Evaluation	9. Multi-disciplinary Training	10. Partnerships
A.	A.	A.	A.	A.
B.	B.	B.	B.	B.
C.	C.	C.	C.	C.
D.	D.	D.	D.	D.
E.	E.	E.	E.	E.
			F.	
Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)	Total = _____  Out of 30 possible; divide total by 6:  _____ (Score)	Total = _____  Out of 25 possible; divide total by 5:  _____ (Score)

# Drug Court Key Components: Graph of Self-assessment Questionnaire Results

Using the scores from the Assessment, plot the final score for each dimension on the graph below.





# DRUG COURT SELF-ASSESSMENT

COURT NAME: \_\_\_\_\_

[illegible]